

FILED



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

98 MAR 27 AM 10:07

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the business is:

CLAY'S LAWN SPRAYING

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
<u>RICK CLAY</u>	<u>500 W. Idaho Ave, Apt B</u>
	<u>MERIDIAN, ID 83642</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

4. The name and address to which future correspondence should be addressed: Phone number (optional): _____

RICK CLAY
500 W. Idaho Ave, Apt B
MERIDIAN, ID 83642

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
 700 West Jefferson
 Basement West
 PO Box 83720
 Boise ID 83720-0080
 208 334-2301

Signature: Rick Clay

Printed Name: RICK CLAY

Capacity: owner

(see instruction # 8 on back of form)

Revision 1/98
g:\corp\form\labn.p05

Secretary of State use only
IDAHO SECRETARY OF STATE

03/27/1998 09:00
 CR: 309 CI: 96431 BH: 95283
 1 @ 20.00 = 20.00 ASSUM NAME

D 13389